PAGE 1 / 80

Image# 13943356342

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

								Office Use Only				
1.	NAME OF COMMITTE	EE (in full)	TYPE OR	PRINT ▼		mple: If typion the lines.	ng, type	12FE41	M5			
Α	merican	Optometric A	Associat	ion Politi	cal Action	Committe	ee				1	
Ш												
AD	DRESS (num	nber and street)		nce Street								
ŀ	Check	if different	Suite 30	0								
ŀ		oreviously ed. (ACC)	Alexand	lria				VA	22314			
2.	FEC IDEN	ITIFICATION N	UMBER ▼		CITY ▲		S	STATE A		ZIP COI	DE 🛦	
	C cod	0024968			3. IS THIS REPORT	\ \ \	NEW N) <b>OR</b>		AMENDED (A)			
4.	TYPE OF (Choose Or	REPORT		port	Feb 20 (M2)		May 20 (M5)	A	ug 20 (M8)		Nov 20 (M11) (Non-Election Year Only)	
	(a) Quarte	erly Reports:	Due	e On:	Mar 20 (M3)		Jun 20 (M6)	S	ep 20 (M9)	×	Dec 20 (M12) (Non-Election Year Only)	
	А	April 15			Apr 20 (M4)		Jul 20 (M7)		Oct 20 (M10)		Jan 31 (YE)	
	Ll Q	uarterly Report (C	Q1) (c)	12-Day	П	Primary (12F	P)	Gene	ral (12G)	П	Runoff (12R)	
	Q Q	uly 15 Juarterly Report (0	Q2)	PRE-Election Report for the		Convention (	(12C)	Sneci	al (12S)			
		october 15 Quarterly Report (0	23)	ricport for t	inc.	Convention (	120)	Орссі	ai (120)			
	Ja	anuary 31 ear-End Report ()		E	Election on	M M /	D   D /	Y Y Y Y	Y	in the State of		
	R	uly 31 Mid-Year leport (Non-electic ear Only) (MY)	on (d)	30-Day		General (300	G)	Runo	ff (30R)		Special (30S)	
		ermination Report ΓΕR)		Report for t	ine:	M = M /	D D /	Y Y Y	Y	in the		
		icn)		I	Election on					State of		
5.	Covering P	Period 1			013	through	11 <sub>_</sub>	/ D D 30	201	3		
l ce	ertify that I h	nave examined th	nis Report a	and to the be	est of my kno	wledge and I	belief it is true	e, correct	and complet	e.		
	-	lame of Treasure	-	brick O.D.								
Sia	nature of Tre	easurer <i>Fred</i>	! Dubrick O.L	).		[Electronicall	y Filedl	ate 12	M / D 2 10	D /	2013	
Jig							<u> </u>			_	_5.5	
NO	TE: Submissi	ion of false, erron	eous, or inc	complete infor	mation may su	bject the per	son signing th	is Report t	o the penaltie	es of 2 L	J.S.C. §437g.	
	Office								FEC	FOR	M 3X	
	Use Only									ev. 12/20		

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

#### American Optometric Association Political Action Committee

Report Covering the Period: From: 11 01 2013 To: 11 30 2013

		COLUMN A This Period	COLUMN B Calendar Year-to-Date				
6.	(a) Cash on Hand January 1, 2013		487852.98				
	(b) Cash on Hand at Beginning of Reporting Period	585115.22					
	(c) Total Receipts (from Line 19)	39745.15	740749.13				
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	624860.37	1228602.11				
7.	Total Disbursements (from Line 31)	35740.83	639482.57				
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	589119.54	589119.54				
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00					
10.	Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00					

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

#### American Optometric Association Political Action Committee

Covering the Period: From: 11	01 2013 To:	11 30 2013		
I. Receipts	COLUMN B Calendar Year-to-Date			
	28945.01	497769.15		
(i) Itemized (use Schedule A)	200-40.01	ier recite		
	10775.34	241612.79		
Lines 11(a)(i) and (ii)	39720.35	739381.94		
· ·	0.00	0.00		
	0.00	0.00		
	39720.35	739381.94		
sfers From Affiliated/Other				
y Committees	0.00	0.00		
oans Received	0.00	0.00		
Repayments Received	0.00	0.00		
· ·	7	7		
ry Totals to Line 37, page 5)	0.00	0.00		
		7		
ederal Candidates and Other				
ical Committees	0.00	1000.00		
r Federal Receipts				
dends, Interest, etc.)	24.80	367.19		
sfers from Non-Federal and Levin Funds				
lon-Federal Account				
(from Schedule H3)	0.00	0.00		
	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			
evin Funds (from Schedule H5)	0.00	0.00		
otal Transfers (add 18(a) and 18(b))	0.00	0.00		
	ributions (other than loans) From: Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	ributions (other than loans) From: Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures: (a) Allocated Federal/Non-Federal		Jaionaa Tour-to-Date
Activity (from Schedule H4)  (i) Federal Share	0.00	0.00
(i) Federal Share		
(ii) Non-Federal Share		0.00
(b) Other Federal Operating Expenditures	2240.83	67287.57
(c) Total Operating Expenditures		01201.51
(add 21(a)(i), (a)(ii), and (b))		67287.57
Transfers to Affiliated/Other Party	0.00	0.00
Committees Contributions to		0.00
Federal Candidates/Committees and Other Political Committees		560500.00
Independent Expenditures	0.00	0.00
(use Schedule E) Coordinated Party Expenditures		0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
,,		
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other		
Than Political Committees		1695.00
(b) Political Party Committees	0.00	0.00
<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	3.00	
(such as PACs)		0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c)	))▶	1695.00
Other Disbursements	0.00	10000.00
Federal Election Activity (2 U.S.C	. §431(20))	
(a) Allocated Federal Election Ac	ptivity	
(from Schedule H6) (i) Federal Share	0.00	0.00
(i) Federal Strate		
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid	· · · · · · · · · · · · · · · · · · ·	0.00
With Federal Funds (c) Total Federal Election Activity		0.00
Lines 30(a)(i), 30(a)(ii) and 3		0.00
Total Diaburaamanta (add Line o	11/o\ 22	
Total Disbursements (add Lines 2 23, 24, 25, 26, 27, 28(d), 29 and		639482.57
	307-0.00	039402.37
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 3		630492 57
from Line 31)	35740.83	639482.57

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures			
3. Total Contributions (other than loans) (from Line 11(d), page 3)	39720.35	739381.94	
4. Total Contribution Refunds (from Line 28(d))	0.00	1695.00	
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	39720.35	737686.94	
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	2240.83	67287.57	
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
8. Net Operating Expenditures (subtract Line 37 from Line 36)	2240.83	67287.57	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE		6	OF		80		
(che	(check only one)											
×	11a		11b		11c		12					
	13		14		15		16	;		17		

	tatements may not be sold or used by any person name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
American Optometric Association	on Political Action Committee	
Full Name (Last, First, Middle Initial)  A. Dr Joseph M Di Girolamo		Date of Receipt
Mailing Address 1460 Brentwood Way		11 04 2013
City	State Zip Code	Transaction ID: 36584055
Earlysville	VA 22936-2837	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)  3. Dr Kathleen E Powell		Date of Receipt
Mailing Address 9710 Copper Dr		11 06 2013
City	State Zip Code	Transaction ID: 36601877
Anchorage	AK 99507-1226	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 765.00	
Full Name (Last, First, Middle Initial)  Dr Samuel Pierce		Date of Receipt
Mailing Address 2679 Vesclub Cir		11 06 _2013 _
City	State Zip Code	Transaction ID : 36602222
Vestavia	AL 35216-1356	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	2000.00	
SUBTOTAL of Receipts This Page (optional)		1585.00
TOTAL This Period (last page this line number	only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:

(check only one)

X 11a 11b 11

FOR LINE	NUMBER	:   PAGE	5 7 OF	80						
(check only one)										
<b>X</b> 11a	11b	11c	12							
13	14	15	16	17						

	Statements may not be sold or used by any person ename and address of any political committee to	
NAME OF COMMITTEE (In Full) American Optometric Association	on Political Action Committee	
Full Name (Last, First, Middle Initial)  A. Dr Karla Zadnik  Mailing Address 183 Franklin Ave		Date of Receipt
Mailing Address 163 Franklin Ave		11 06 2013
City	State Zip Code	Transaction ID: 36602270
Worthington	OH 43085-3186	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  3. Dr Kimberly Ocampo		Date of Receipt
Mailing Address 823 6th Ave SE		11 07 2013
City	State Zip Code	Transaction ID : 36604331
Decatur	AL 35601-3021	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  Dr April L Jasper		Date of Receipt
Mailing Address Po Box 2375		11 08 2013
City West Palm Bch	State Zip Code FL 33402-2375	Transaction ID : 36604333  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		600.00
TOTAL This Period (last page this line number	only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)

FOR LINE NUMBER:					PAGE		8	OF		80
(check only one)										
X	11a		11b		11c		12			
	13		14		15		16	;		17

	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Optometric Associat	ion Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr Lynda L Jones  Mailing Address 2117 Grandview Dr		Date of Receipt
ag / latious Z11/ Glatiquiew Di		11 11 2013
City	State Zip Code	Transaction ID : 36608624
Torrington	WY 82240-2638	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	-
Self Employed	Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  765.00	
Full Name (Last, First, Middle Initial)  3. Dr Jeffrey A Wilson		Date of Receipt
Mailing Address 1460 N Riverbend Dr		11 12 2013
Croon River	State Zip Code WY 82935-6308	Transaction ID : 36609298
Green River	WY 82935-6308	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	1
Self Employed	Doctor of Optometry	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  C. Dr Wanda C Batson		Date of Receipt
Mailing Address 8120 Rock Hill Rd		11 06 2013
City Baker	State Zip Code FL 32531-7337	Transaction ID : 36609319  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
Self Employed	Doctor of Optometry	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		1150.00
TOTAL This Period (last page this line numbe	r only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR	FOR LINE NUMBER:					-	9	OF		80	
(check only one)											
X	11a		11b		11c		12				
	13		14		15		16	;		17	

	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Optometric Association	tion Political Action Committee	
Full Name (Last, First, Middle Initial)  A. Dr Chad Carlsson		Date of Receipt
Mailing Address 1415 S SANDSTONE ST		11 06 2013
City	State Zip Code AZ 85296-4370	Transaction ID: 36609320
FEC ID number of contributing federal political committee.	AZ 85296-4370	Amount of Each Receipt this Period  25.00
Name of Employer  Self Employed  Receipt For:  Primary General  Other (specify) ▼	Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  225.00	
Full Name (Last, First, Middle Initial)  Dr Chad Carlsson  Mailing Address 1415 S SANDSTONE ST		Date of Receipt  11 11 2013
City	State Zip Code	Transaction ID : 36609321
GILBERT  FEC ID number of contributing federal political committee.	AZ 85296-4370	Amount of Each Receipt this Period 25.00
Name of Employer Self Employed	Occupation  Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  Dr Edwin Endo		Data of Danaint
Mailing Address 98-828 HILIU PL		Date of Receipt  11 13 2013
City AIEA	State Zip Code HI 96701-2785	Transaction ID : 36612925  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.66
Name of Employer	Occupation	-
Self Employed	Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 416.60	
SUBTOTAL of Receipts This Page (optional).		91.66
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr William Gil Davis Date of Receipt Mailing Address Po Box 516 01 2013 11 City Zip Code State Transaction ID: 36613253 MS Newton 39345-0516 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Jon Stephen Jacobs Date of Receipt Mailing Address 9601 Sea Turtle Dr 11 01 2013 City State Zip Code Transaction ID: 36613254 FL **Plantation** 33324-2821 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Kyle Cheatham Date of Receipt Mailing Address 18472 VAN CAMP DR 11 80 2013 City State Zip Code Transaction ID: 36613276 NF **OMAHA** 68130-4251 Amount of Each Receipt this Period FEC ID number of contributing 400.00 С federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 775.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

### SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 11 OF

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)       X       11a       11b       11c       12       13       14       15       16       17
			erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Optometric Associ		,,	
Full Name (Last, First, Middle Initial)  A. Dr Janet Rose Fett  Mailing Address 517 S RIDGE DR			Date of Receipt
City S SIOUX CITY	State NE	Zip Code 68776-3828	11 08 2013  Transaction ID : 36613281  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		100.00
Name of Employer  Self Employed  Receipt For:	Occupation Doctor of Op	otometry Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate	300.00	
Full Name (Last, First, Middle Initial)  B. Dr Gary D Finn  Mailing Address 6708 N 160Th St			Date of Receipt
City Omaha	State NE	Zip Code 68116-4073	11 08 2013  Transaction ID : 36613283  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00110 4070	Amount of Each Receipt this Period  72.00
Name of Employer Self Employed Receipt For:	Occupation Doctor of Op	•	
Primary General Other (specify) ▼	Aggregate \	Year-to-Date ▼ 216.00	
C. Pull Name (Last, First, Middle Initial) Dr Eric Gengenbach Mailing Address 32830 ROAD 761			Date of Receipt
City GRANT	State NE	Zip Code 69140-3202	Transaction ID : 36613285  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		120.00
Name of Employer  Self Employed  Receipt For:	Occupation Doctor of Op	•	
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 280.00	
SUBTOTAL of Receipts This Page (optional	վ)	)	292.00
TOTAL This Period (last page this line num	nber only)		

FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Victoria A Gengenbach Date of Receipt Mailing Address 75490 Road 330 80 2013 11 City Zip Code State Transaction ID: 36613286 ΝE Grant 69140-3330 Amount of Each Receipt this Period FEC ID number of contributing 120.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Steven J Gradowski Date of Receipt Mailing Address 6214 S 118Th Plz 11 80 2013 City State Zip Code Transaction ID: 36613289 NE Omaha 68137-4403 Amount of Each Receipt this Period FEC ID number of contributing 400.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. DR Scott Greder Date of Receipt Mailing Address 2105 S 63rd St Apt 8 11 80 2013 City State Zip Code Transaction ID: 36613292 NF Omaha 68106-2100 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 620.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE (check only one) X 11a 11b 11c

13 OF 80 Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Richard Lee Kant Date of Receipt Mailing Address 1115 E Nobes Rd 08 2013 11 City Zip Code State Transaction ID: 36613299 ΝE York 68467-4523 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Ann Feidler-Klein Date of Receipt Mailing Address 909 PARK WAY 11 80 2013 City State Zip Code Transaction ID: 36613303 **NORFOLK** NE 68701-3068 Amount of Each Receipt this Period FEC ID number of contributing 400.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Jeffrey S Klein Date of Receipt Mailing Address 909 Park Way 80 11 2013 City Zip Code State Transaction ID: 36613304 NF Norfolk 68701-3068 Amount of Each Receipt this Period FEC ID number of contributing 400.00 С federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 1100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 14 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Corey M Langford Date of Receipt Mailing Address 7756 N 153Rd St 2013 11 08 City Zip Code State Transaction ID: 36613310 ΝE 68007-1551 Bennington Amount of Each Receipt this Period FEC ID number of contributing 400.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Walter C Mc Cormick Date of Receipt Mailing Address 924 Tibbals St 11 80 2013 City State Zip Code Transaction ID: 36613338 NE Holdrege 68949-1653 Amount of Each Receipt this Period FEC ID number of contributing 102.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 306.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr David Michaels Date of Receipt Mailing Address 10655 RIDGEMONT CIR 11 80 2013 City State Zip Code Transaction ID: 36613340 NF **OMAHA** 68136-4029 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 802.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 15 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Brett Alan Monson Date of Receipt Mailing Address 1011 Michael Dr 08 2013 11 City Zip Code State Transaction ID: 36613343 ΝE Papillion 68046-6135 Amount of Each Receipt this Period FEC ID number of contributing 400.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Richard Powell Date of Receipt Mailing Address 820 MANCHESTER CIR 11 80 2013 City State Zip Code Transaction ID: 36613350 LINCOLN NE 68528-1043 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Paul L Salansky Jr Date of Receipt Mailing Address 2521 Whitaker Rd 11 80 2013 Zip Code City State Transaction ID: 36614905 NF Nebraska City 68410-1025 Amount of Each Receipt this Period FEC ID number of contributing 120.00 С federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify) 620.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

### SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 16 OF 80

TEMIZED RECEIPTS	for each c	ate schedule(s) ategory of the ummary Page	(check only	11b	11c	12	17
Any information copied from such Reports and Sta							
or for commercial purposes, other than using the  NAME OF COMMITTEE (In Full)  American Optometric Associatio			e to solicit coi	ntributions	from sucr	committe	ee
Full Name (Last, First, Middle Initial)  Dr Mark Toelle  Mailing Address 16258 Craig Ave  City  Bennington  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary  General  Other (specify)	State Zip Code NE 68007-18  C  Occupation Doctor of Optometry  Aggregate Year-to-Date	885	Date of	2013 8 is Period 100.	00		
Full Name (Last, First, Middle Initial)  Dr Ellen L Weiss  Mailing Address 13603 Pflug Rd  City Springfield  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For: Primary General Other (specify)	State Zip Code NE 68059-48  C  Occupation  Doctor of Optometry  Aggregate Year-to-Date	338	11 Trans	f Receipt  / 08  action ID: t of Each F	3661491		00
Full Name (Last, First, Middle Initial)  Dr Christopher S Wolfe  Mailing Address 6515 S 157Th St  City Omaha  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code NE 68135-53  C  Occupation Doctor of Optometry Aggregate Year-to-Date	▼ 400.00	11 Trans	f Receipt  / 08  saction ID:  t of Each F	: 3661491		
SUBTOTAL of Receipts This Page (optional)		)				900.	00

TOTAL This Period (last page this line number only).....

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Steven S Wolfe Date of Receipt Mailing Address 15324 Weber St 08 2013 11 City Zip Code State Transaction ID: 36614917 ΝE 68007-1407 Bennington Amount of Each Receipt this Period FEC ID number of contributing 400.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Darren J Wright Date of Receipt Mailing Address 1702 M St 11 80 2013 City State Zip Code Transaction ID: 36614918 NE Auburn 68305-2146 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Robert Magwire Date of Receipt Mailing Address 2312 Cromwell Dr 11 80 2013 City Zip Code State Transaction ID: 36614919 ID Saint Maries 83861-1373 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 18 OF 80 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Eric Pierce Date of Receipt Mailing Address 1558 Oakley Ave 08 2013 11 City State Zip Code Transaction ID: 36614920 ID Burley 83318-1805 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Delbert Oman Date of Receipt Mailing Address 8 W 218 S 11 80 2013 City State Zip Code Transaction ID: 36614921 ID Burley 83318-5759 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Dr Monya D Elgart Date of Receipt Mailing Address 1156 Boston Post Rd 11 80 2013 City State Zip Code Transaction ID: 36614922 CT Old Saybrook 06475-4405 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify)

850.00

SUBTOTAL of Receipts This Page (optional).....

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Elliot F Lasky Date of Receipt Mailing Address 15 Masefield Rd 80 2013 11 City Zip Code State Transaction ID: 36614923 03062-2517 NH Nashua Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Marsha Beach Date of Receipt Mailing Address 652 CLOVERGLEN DR 11 15 2013 City State Zip Code Transaction ID: 36616250 **GRAND JCT** CO 81504-5114 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Martin Carroll Date of Receipt Mailing Address 3700 Essex Rd 11 15 2013 City Zip Code State **Transaction ID: 36616251** WY Cheyenne 82001-1641 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) 500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr George Hertneky Date of Receipt Mailing Address 16862 County Road 28 2013 11 16 City Zip Code State Transaction ID: 36624987 CO Brush 80723-9424 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr N. Gregory Richardson Date of Receipt Mailing Address 1440 Eastridge Dr 11 16 2013 City State Zip Code Transaction ID: 36624992 ID Pocatello 83201-3103 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Jason R Kolodziejczyk Date of Receipt Mailing Address 1023 Buckand 11 17 2013 City Zip Code State Transaction ID: 36635763 OH Fremont 43420-2805 Amount of Each Receipt this Period FEC ID number of contributing 125.00 С federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 205.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Sally Ann Hartenstein Date of Receipt Mailing Address 3 TAYLOR RIVER RD 2013 11 City Zip Code State Transaction ID: 36635764 NH HAMPTON FALLS 03844-2012 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr George W Veliky Date of Receipt Mailing Address 137 Oak Grove Ave 2013 11 17 City State Zip Code Transaction ID: 36635766 NJ Hasbrouck Hts 07604-1225 Amount of Each Receipt this Period FEC ID number of contributing 45.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 486.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Jennifer E Davis Date of Receipt Mailing Address 16 Pambrook Dr 11 17 2013 City Zip Code State Transaction ID: 36635767 Fishersville VA 22939-2123 Amount of Each Receipt this Period FEC ID number of contributing 41.67 С federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 416.14 Other (specify) 106.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Daniel J Kosterman Date of Receipt Mailing Address 16420 Carla St 2013 11 City Zip Code State Transaction ID: 36635768 Eagle River ΑK 99577-7618 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 935.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Dennis A Swarner Date of Receipt Mailing Address Po Box 1669 11 2013 17 City State Zip Code Transaction ID: 36635769 AK Kenai 99611-1669 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 935.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Lee Ann Barrett Date of Receipt Mailing Address 1199 E Morgan St 11 17 2013 City Zip Code State Transaction ID: 36635770 MO Boonville 65233-1336 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 220.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page	X 11a	11b	11c	12					
zotanou cummary r ago	13	<b>1</b> 4	15	16					

	Statements may not be sold or used by any pers ne name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Optometric Associat	ion Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr Freddie M Mayes  Mailing Address 117 Magnolia Dr  City Central City  FEC ID number of contributing federal political committee.  Name of Employer Self Employed Receipt For:  Primary General Other (specify)	State Zip Code KY 42330-1727  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  550.00	Date of Receipt  11 17 2013  Transaction ID: 36635771  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) Dr Larry C Wallis  Mailing Address 20 Kentshire Ct  City Greenville  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code DE 19807-2583  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  490.00	Date of Receipt  11 17 2013  Transaction ID: 36635772  Amount of Each Receipt this Period  40.00
Full Name (Last, First, Middle Initial)  Dr Thomas Annunziato  Mailing Address 11700 Northview Dr  City Aledo  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code TX 76008-5223  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  833.30	Date of Receipt  11 18 2013  Transaction ID: 36642080  Amount of Each Receipt this Period  83.33
SUBTOTAL of Receipts This Page (optional)	<u> </u>	173.33
TOTAL This Period (last page this line numbe	r only)	7

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Nancy Barr Date of Receipt Mailing Address 435 Conservatory Pt 19 2013 11 City State Zip Code Transaction ID: 36643665 GA Fayetteville 30215-8609 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Susan Brunnett Date of Receipt Mailing Address 9940 ASHLEIGH WAY 11 19 2013 City State Zip Code Transaction ID: 36643666 HIGHLANDS RANCH CO 80126-4244 Amount of Each Receipt this Period FEC ID number of contributing 166.67 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1833.37 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Kevin Alexander Date of Receipt Mailing Address 2116 Wildwood Ct 11 20 2013 City State Zip Code Transaction ID: 36646696 CA Fullerton 92831-1339 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 236.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Kathleen Goff Date of Receipt Mailing Address 114 CRESTED PEAK CT 20 2013 11 City Zip Code State Transaction ID: 36646697 NM 88008-9423 SANTA TERESA Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.06 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Douglas Arthur Safley Date of Receipt Mailing Address 700 1St Ave 11 20 2013 City State Zip Code Transaction ID: 36646698 MT Havre 59501-4402 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Dennis Brtva Date of Receipt Mailing Address 57 Pebblebrook Ct 11 20 2013 City State Zip Code Transaction ID: 36646699 IL Bloomington 61705-6300 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) 213.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Lynn Smith Hammonds Date of Receipt Mailing Address 2725 Smyer Rd 20 2013 11 City Zip Code State Transaction ID: 36646700 Vestavia AL 35216-1026 Amount of Each Receipt this Period FEC ID number of contributing 166.67 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1166.69 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Mark Mentzer Date of Receipt Mailing Address 2200 Blairsferry Xing 11 20 2013 City State Zip Code Transaction ID: 36646701 IΑ Hiawatha 52233-7900 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Dr Jonathan Toso Date of Receipt Mailing Address 1101 Angel Ln 11 20 2013 City Zip Code State Transaction ID: 36646702 SD Canton 57013-2634 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) 221.67 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

### SCHEDULE A (FEC Form 3X)

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TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
		ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Optometric Associa	ation Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr Lynn Greenspan  Mailing Address 77 N Iroquois Ln  City Chester Sprgs  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code PA 19425-2929  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  220.00	Date of Receipt  11 20 2013  Transaction ID: 36646703  Amount of Each Receipt this Period  20.00
Full Name (Last, First, Middle Initial)  Dr Marc Robert Bloomenstein  Mailing Address 5101 E CALAVAR RD  City SCOTTSDALE  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For:  Primary General Other (specify) ▼	State Zip Code AZ 85254-2869  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  1100.00	Date of Receipt  11 20 2013  Transaction ID: 36646704  Amount of Each Receipt this Period  100.00
Full Name (Last, First, Middle Initial)  Dr Robert Parks  Mailing Address 86 Darlene Dr  City  Wakefield  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary  General  Other (specify)	State Zip Code RI 02879-8307  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  343.75	Date of Receipt  11 20 2013  Transaction ID: 36646706  Amount of Each Receipt this Period  31.25
SUBTOTAL of Receipts This Page (optional)	)	▶ 151.25
TOTAL This Period (last page this line numb	per only)	>

### SCHEDULE A (FEC Form 3X)

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full)  American Optometric Association	on Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr Jeffrey Gonnason  Mailing Address 6721 GLOUCESTER PL  City  ANCHORAGE  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General  Other (specify)	State Zip Code AK 99504-3343  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  924.00	Date of Receipt  11 20 2013  Transaction ID: 36646707  Amount of Each Receipt this Period  84.00
Full Name (Last, First, Middle Initial)  Dr Jon Frederick Pederson  Mailing Address 1025 Milwaukee St  City  Denver  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For:  Primary  General  Other (specify)	State Zip Code CO 80206-3337  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  450.00	Date of Receipt  11 20 2013  Transaction ID: 36651579  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial)  Dr David Hays  Mailing Address 8720 52nd Street Ct W  City University Place  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code WA 98467-1758  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  924.00	Date of Receipt  11 21 2013  Transaction ID: 36652180  Amount of Each Receipt this Period  84.00
SUBTOTAL of Receipts This Page (optional)		218.00
TOTAL This Period (last page this line number	only)	

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Use separate schedule(s)	(check only one)								
for each category of the Detailed Summary Page		11a		11b		11c		12	
		13		14		15		16	

Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Optometric Associati	on Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr Paul Gustafson  Mailing Address 159 Sunflower St		Date of Receipt
		11 21 2013
City Casper	State Zip Code WY 82604-3805	Transaction ID : 36652181
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  35.00
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	
Full Name (Last, First, Middle Initial)  3. Dr Viktoria Davis		Date of Receipt
Mailing Address 310 E MAIN ST	1,1 21 2013	
City	State Zip Code	Transaction ID : 36652182
MADELIA	MN 56062-1735	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)  C. Dr Randolph Brooks		Date of Receipt
Mailing Address 3 Schindler Dr		11 21 2013
City Succasunna	State Zip Code NJ 07876-1183	Transaction ID: 36652184
	143 0/8/6-1183	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	1800.00	
SUBTOTAL of Receipts This Page (optional)		485.00
TOTAL This Period (last page this line number	only)	

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Ronald Lee Hopping Date of Receipt Mailing Address 1801 Creekside Dr 2013 11 21 City State Zip Code Transaction ID: 36652185 TX Friendswood 77546-7821 Amount of Each Receipt this Period FEC ID number of contributing 166.67 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1833.37 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Desiree Tyer Hopping Date of Receipt Mailing Address 1801 Creekside Dr 11 21 2013 City State Zip Code Transaction ID: 36652186 Friendswood TX 77546-7821 Amount of Each Receipt this Period FEC ID number of contributing 166.67 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1833.37 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Mary Lynn Gregory Date of Receipt Mailing Address 3332 120th Ave 11 21 2013 City Zip Code State Transaction ID: 36652187 MN Clear Lake 55319-9506 Amount of Each Receipt this Period FEC ID number of contributing 49.59 С federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 550.45 Other (specify) 382.93 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 31 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Jan Cooper Date of Receipt Mailing Address 101 Chandler W 2013 11 21 City State Zip Code Transaction ID: 36652190 CA Highland 92346-5482 Amount of Each Receipt this Period FEC ID number of contributing C 166.67 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1166.69 Other (specify) Full Name (Last, First, Middle Initial) B. Dr David K Talley Date of Receipt Mailing Address 1698 Brookside Dr 2013 11 22 City State Zip Code Transaction ID: 36652374 TN Germantown 38138-2531 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 935.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Blaine Bird Date of Receipt Mailing Address 2001 E 775 S 11 22 2013 City Zip Code State Transaction ID: 36652375 UT Springville 84663-3206 Amount of Each Receipt this Period FEC ID number of contributing 30.42 С federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 334.62 Other (specify) 282.09 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 32 OF 80 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Scott Burks Date of Receipt Mailing Address Po Box 1351 2013 11 22 City Zip Code State Transaction ID: 36652376 MO Buffalo 65622-1351 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Robert Craig Janot Date of Receipt Mailing Address 100 Orchard St 2013 11 22 City State Zip Code Transaction ID: 36652379 LA Sulphur 70663-6268 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 458.37 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Matthew Maki Date of Receipt Mailing Address 135 W Church St 11 22 2013 City State Zip Code Transaction ID: 36652380 MI Williamston 48895-1119 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) 166.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

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	Statements may not be sold or used by any persibe name and address of any political committee t			
NAME OF COMMITTEE (In Full) American Optometric Association	tion Political Action Committee			
Full Name (Last, First, Middle Initial)  Dr Paul Anton Hodge	ul Anton Hodge			
Mailing Address 3042 118th Ave		11 23 2013		
City	State Zip Code	Transaction ID : 36657866		
Allegan	MI 49010-9555	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer	Occupation			
Self Employed	Doctor of Optometry			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  550.00			
Full Name (Last, First, Middle Initial)  3. DR Barry Barresi		Date of Receipt		
Mailing Address 659 Spyglass Summit Dr	11 23 2013			
City Chesterfield	State Zip Code  MO 63017-2142	Transaction ID : 36657868		
		Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	166.67		
Name of Employer	Occupation			
Self Employed Receipt For:	Doctor of Optometry	_		
Primary General	Aggregate Year-to-Date ▼			
Other (specify) ▼	1833.37			
Full Name (Last, First, Middle Initial)  C. Dr Ron Benner	1	Date of Receipt		
Mailing Address 1408 E Maryland Ln		11 23 / Y = Y = Y = Y		
City Laurel	State Zip Code MT 59044-2238	Transaction ID : 36657869  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	166.67		
Name of Employer	Occupation	-		
Self Employed	Doctor of Optometry			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General  Other (specify) ▼	1726.70			
SUBTOTAL of Receipts This Page (optional).		383.34		
TOTAL This Period (last page this line number				

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Rebecca H Wartman Date of Receipt Mailing Address 46 Lambeth Walk 2013 11 23 City Zip Code State Transaction ID: 36657870 28730-7721 NC Fairview Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 2200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Jeff A Hayden Date of Receipt Mailing Address 679 Plumtree Ln 2013 11 23 City State Zip Code Transaction ID: 36657872 MI Fenton 48430-4207 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Chris R Fields Date of Receipt Mailing Address 173 Peterkin Hill Rd 11 23 2013 City Zip Code State Transaction ID: 36657874 S Woodstock VT 05071-4500 Amount of Each Receipt this Period FEC ID number of contributing C 167.00 federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 1837.00 Other (specify) 467.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	tatements may not be sold or used by any perso name and address of any political committee to		
NAME OF COMMITTEE (In Full)			
American Optometric Association	on Political Action Committee		
Full Name (Last, First, Middle Initial)  1. Dr Jacqueline Bowen		Date of Receipt	
Mailing Address 3930 W 19th Street Ln		11 24 2013	
City	State Zip Code	Transaction ID: 36657879	
Greeley	CO 80634-3446	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	50.00	
Name of Employer	Occupation		
Self Employed	Doctor of Optometry		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	550.00		
Full Name (Last, First, Middle Initial)  3. Dr Shira Pipkin		Date of Receipt	
Mailing Address 3587 Buffalo Ave		11 24 2013	
City	State Zip Code	Transaction ID : 36657880	
Broomfield	CO 80020-9016	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С	25.00	
Name of Employer	Occupation		
Self Employed	Doctor of Optometry		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  275.00		
Full Name (Last, First, Middle Initial)  C. Dr Pierre J Anctil		Date of Receipt	
Mailing Address 12 Garden Dr		11 24 2013	
City	State Zip Code	Transaction ID : 36657881	
Colorado Spgs	CO 80904-4414	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С	50.00	
Name of Employer	Occupation		
Self Employed	Doctor of Optometry		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General			
Other (specify) $\blacktriangledown$	550.00		
SUBTOTAL of Receipts This Page (optional)		125.00	
TOTAL This Period (last page this line number	TOTAL This Period (last page this line number only)		

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Lynn Hellerstein Date of Receipt Mailing Address 8611 E OTERO PL 2013 11 24 City Zip Code State Transaction ID: 36657882 CO CENTENNIAL 80112-3317 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Eric J Bohjanen Date of Receipt Mailing Address 2145 Academy Cir 2013 11 24 City State Zip Code Transaction ID: 36657883 Colorado Spgs CO 80909-1658 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Dori Carlson Date of Receipt Mailing Address 121 Briggs Ave N 11 24 2013 City Zip Code State Transaction ID: 36657886 ND Park River 58270-4507 Amount of Each Receipt this Period FEC ID number of contributing 166.67 С federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 1833.37 Other (specify) 241.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Optometric Associati	on Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr Paul Schroeder  Mailing Address 616 12Th St Sw		Date of Receipt
		11 24 2013
City	State Zip Code	Transaction ID: 36657888
Le Mars	IA 51031-2265	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial)  3. Dr Steven Thomas Reed  Mailing Address 4550 Simpson Highway 28 W	1	Date of Receipt
		11 24 2013
City	State Zip Code	Transaction ID: 36657891
Magee	MS 39111-5187	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	90.00
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 990.00	
Full Name (Last, First, Middle Initial)  C. Dr Randall Hoch		Date of Receipt
Mailing Address 206 Fox Farm Rd		11 24 2013
City	State Zip Code MT 59457-8696	Transaction ID: 36657892
Lewistown	MT 59457-8696	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	700.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	220.00
TOTAL This Period (last page this line number	only)	

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Ashley Mc Ferron Date of Receipt Mailing Address 5079 W Sunset Dr 25 2013 11 City Zip Code State Transaction ID: 36657954 OR 97035-4253 Lake Oswego Amount of Each Receipt this Period FEC ID number of contributing C 41.67 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 958.37 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Charles Atwell Date of Receipt Mailing Address 238 Chasse Cir 11 25 2013 City State Zip Code Transaction ID: 36657955 IL St Charles 60174-1418 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 462.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Dr Rustin Hatch Date of Receipt

Mailing Address 1425 EVERGREEN DR 11 25 2013 City Zip Code State Transaction ID: 36657956 ID TWIN FALLS 83301-3423 Amount of Each Receipt this Period FEC ID number of contributing 53.33 С federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 586.63 Other (specify)

137.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr John Bowen Date of Receipt Mailing Address 2570 Northshore Blvd Ste 200 2013 11 25 City Zip Code State Transaction ID: 36657957 TX 75028-8386 Flower Mound Amount of Each Receipt this Period FEC ID number of contributing 84.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 924.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Stacie Layne Virden Date of Receipt Mailing Address 4324 Green Point Dr 11 25 2013 City State Zip Code Transaction ID: 36657958 TX Waco 76710-1406 Amount of Each Receipt this Period FEC ID number of contributing 90.91 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.01 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Robert Owens Date of Receipt Mailing Address 8 Century Ln 11 25 2013 City State Zip Code Transaction ID: 36657959 PΑ Newmanstown 17073-8982 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 224.91 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 40 OF 80 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Frederick Darin Date of Receipt Mailing Address 405 TIRRELL RD 2013 11 25 City Zip Code State Transaction ID: 36657960 **CHARLOTTE** MI 48813-2131 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 916.63 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Mamie Cassandra Chan Date of Receipt Mailing Address 13713 Vic Rd NE 11 25 2013 City State Zip Code Transaction ID: 36657961 NM Albuquerque 87112-6602 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Mark R Lee Date of Receipt Mailing Address Po Box 184 11 25 2013 City Zip Code State Transaction ID: 36657962 NV Blue Diamond 89004-0184 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) 163.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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om such Reports and Statements may not be sold or used by any person for the number of soliciting contributions											

Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any pers he name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Optometric Associate	tion Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr Christopher Colburn  Mailing Address 30 Winchester Rd		Date of Receipt
		11 25 2013
City	State Zip Code	Transaction ID: 36657963
Lakewood	NY 14750-1734	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 916.74	
Full Name (Last, First, Middle Initial)  Dr Gerald Neidigh Jr		Date of Receipt
Mailing Address 3030 Middlewood Rd		11 25 2013
City Midlothian	State Zip Code VA 23113-2167	Transaction ID : 36657965
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  750.00	
Full Name (Last, First, Middle Initial)		
Dr Markus Barth		Date of Receipt
Mailing Address 1346 HELLER DR		11 25 2013
City YARDLEY	State Zip Code PA 19067-2714	Transaction ID : 36657967  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.67
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	416.70	
SUBTOTAL of Receipts This Page (optional)		375.01
TOTAL This Period (last page this line number	er only)	

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TEMIZED RECEIPTS	for each category of the  Detailed Summary Page	X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any per e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Optometric Association	on Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr D. Matthew Burchett  Mailing Address 1231 Parkview Way  City Richmond  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code KY 40475-3436  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  340.00	Date of Receipt  11 25 2013  Transaction ID: 36657968  Amount of Each Receipt this Period  85.00
Full Name (Last, First, Middle Initial)  Dr Greg Caldwell  Mailing Address 225 Terrace Dr  City  Lilly  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code PA 15938-5819  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  1666.70	Date of Receipt  11 25 2013  Transaction ID: 36657970  Amount of Each Receipt this Period  166.67
Full Name (Last, First, Middle Initial)  Dr John Coble  Mailing Address 1501 SUNSET HILL DR  City ROCKWALL  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code TX 75087-3216  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  833.50	Date of Receipt  11 25 2013  Transaction ID : 36657971  Amount of Each Receipt this Period  83.35
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	335.02
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 43 OF 80 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr David S Cook Date of Receipt Mailing Address 6460 Devon Ln 2013 11 25 City Zip Code State Transaction ID: 36657973 Cadillac MI 49601-9549 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Joe Ernest Ellis Date of Receipt Mailing Address 179 Wood Trce 11 25 2013 City State Zip Code Transaction ID: 36657975 KY **Benton** 42025-9400 Amount of Each Receipt this Period FEC ID number of contributing 166.67 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1666.70 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Lance W Fagan Date of Receipt Mailing Address 6160 N 17Th St 11 25 2013 City Zip Code State Transaction ID: 36657976 ID **Dalton Gardens** 83815-9617 Amount of Each Receipt this Period FEC ID number of contributing 31.00 С federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 310.00 Other (specify) 222.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr James Boccuzzi Date of Receipt Mailing Address 689 Mansfield City Rd 2013 11 25 City State Zip Code Transaction ID: 36660043 CT Storrs Mansfield 06268-2728 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Douglas J Walker Date of Receipt Mailing Address Po Box 988 11 26 2013 City State Zip Code Transaction ID: 36660288 OR **Brookings** 97415-0021 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Audie M Teague Jr Date of Receipt Mailing Address 105 Friar Tuck Ln 11 26 2013 City State Zip Code Transaction ID: 36660289 AR Prescott 71857-2608 Amount of Each Receipt this Period FEC ID number of contributing 84.00 С federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 924.00 Other (specify) 359.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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ITEMIZED RECEIPTS 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr David Duane Mohon Date of Receipt Mailing Address 801 Memorial Dr 2013 11 26 City State Zip Code Transaction ID: 36660293 Piedmont AL 36272-6632 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Mark Turner Wells Date of Receipt Mailing Address 2523 Starlight Ct 11 26 2013 City State Zip Code Transaction ID: 36660324 WY Cheyenne 82009-9747 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr C. Thomas Crooks III Date of Receipt Mailing Address 1229 Highland Lakes Trl 11 27 2013 City State Zip Code Transaction ID: 36663157 ΑL Birmingham 35242-6886 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

#### SCHEDULE A (FEC Form 3X) 17

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NAME OF COMMITTEE (In Full)  American Optometric Associ	ation Politica	al Action Committee					
Full Name (Last, First, Middle Initial)  A. Dr Maryjane Healey			Date o	f Receipt			
Mailing Address 6710 124Th PI Se			11	27	/ Y	2013	Y
City Snohomish	State WA	Zip Code 98296-8649		saction ID: 3			_
FEC ID number of contributing federal political committee.	С					200.	00
Name of Employer	Occupation						
Self Employed	Doctor of O	ptometry					
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 2200.00	1				
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Full Name (Last, First, Middle Initial)  B. Dr Keith Darren Chow			Date o	f Receipt			
Mailing Address 1436 Newfoundland Dr			11	26	/ Y	2013	Y
City	State	Zip Code	Trans	saction ID: 3	666316	9	
Sunnyvale	CA	94087-4239	Amoun	t of Each Re	ceipt th	is Period	
FEC ID number of contributing federal political committee.	С			7	- 7	500.	00
Name of Employer	Occupation						
Self Employed	Doctor of O	ptometry					
Receipt For:  Primary  General	Aggregate	Year-to-Date ▼					
Other (specify) ▼		, 500.00					
Full Name (Last, First, Middle Initial)  C. Dr Joshua Mc Adams	'		Date o	f Receipt			
Mailing Address 1487 Rainbow View Dr			M - M	/ D D D 26	/ Y	2013	Y
City	State	Zip Code	Tran	saction ID: 3	666317	'1	
Lakeside	AZ	85929	Amoun	t of Each Re	ceipt th	is Period	
FEC ID number of contributing federal political committee.	С			,	,	240.	.00
Name of Employer	Occupation						
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Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	]				
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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Sherri Egashira Date of Receipt Mailing Address 16091 AGATEWOOD RD NE 2013 11 26 City Zip Code State Transaction ID: 36663172 WA BAINBRIDGE IS 98110-1062 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Judy Lee Date of Receipt Mailing Address 6500 Hirabayashi Dr 11 26 2013 City State Zip Code Transaction ID: 36663173 CA San Jose 95120-4500 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Richard Tom Date of Receipt Mailing Address 6500 Hirabayashi Dr 11 26 2013 City State Zip Code Transaction ID: 36663174 CA San Jose 95120-4500 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr David Duane Mohon Date of Receipt Mailing Address 801 Memorial Dr 2013 11 26 City State Zip Code Transaction ID: 36663175 Piedmont AL 36272-6632 Amount of Each Receipt this Period FEC ID number of contributing 400.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Jeanette Jezick Date of Receipt Mailing Address 4 Lynch Rd 11 26 2013 City State Zip Code Transaction ID: 36663182 CT Lebanon 06249-2712 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Victor A Richardson Date of Receipt Mailing Address 230 Farmington Ave 11 26 2013 City State Zip Code Transaction ID: 36663184 CT Farmington 06032-1916 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 465.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Karin Meng Date of Receipt Mailing Address 12555 La Cresta Dr 2013 11 26 City State Zip Code Transaction ID: 36663186 CA Los Altos Hills 94022-2510 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Rodney Fair Date of Receipt Mailing Address 1169 CONEFLOWER WAY 2013 11 28 City State Zip Code Transaction ID: 36663362 **BRIGHTON** CO 80601-6785 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 466.68 Other (specify) Full Name (Last, First, Middle Initial) **c.** Dr J. Gregory Ford Date of Receipt Mailing Address 1623 Hillsboro Ave SE 11 28 2013 City Zip Code State Transaction ID: 36663363 MI **Grand Rapids** 49546-9786 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1066.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) DR Shannon Franklin Date of Receipt Mailing Address 427 Cranberry Ln 2013 11 28 City State Zip Code Transaction ID: 36663364 VA Crozet 22932-3160 Amount of Each Receipt this Period FEC ID number of contributing C 55.56 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 388.92 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Geoffrey Goodfellow Date of Receipt Mailing Address 260 Aspen Dr 2013 11 28 City State Zip Code Transaction ID: 36663365 IL Beecher 60401-5123 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 416.70 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Robert L Jarrell III Date of Receipt Mailing Address 50 Cedar Hill Rd Ne 2013 11 28 City Zip Code State Transaction ID: 36663367 NM Albuquerque 87122-1928 Amount of Each Receipt this Period

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1666.70

С

Occupation

**Doctor of Optometry** 

Aggregate Year-to-Date ▼

166.67

FEC ID number of contributing

General

federal political committee.

Other (specify)

Name of Employer

Primary

Self Employed

Receipt For:

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52 OF 80 Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Steven Arthur Loomis Date of Receipt Mailing Address 6436 Spotted Fawn Run 2013 11 28 City Zip Code State Transaction ID: 36663368 CO 80125-9055 Littleton Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr David Edward Magnus Date of Receipt Mailing Address Po Box 2144 11 28 2013 City State Zip Code Transaction ID: 36663369 NM Corrales 87048-2144 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Harue Jean Marsden Date of Receipt Mailing Address 1445 Prospect Ave Unit D 11 28 2013 City Zip Code State Transaction ID: 36663370 CA Placentia 92870-3816 Amount of Each Receipt this Period FEC ID number of contributing 125.20 С federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) 375.20 SUBTOTAL of Receipts This Page (optional).....

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NAME OF COMMITTEE (In Full) American Optometric Association	on Political Action Committee	
Full Name (Last, First, Middle Initial)  Or Dawn Marie Miller		Date of Receipt
Mailing Address 3004 E Lake Hill Dr		11 28 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Orange	State         Zip Code           CA         92867-1910	Transaction ID : 36663372  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer  Self Employed  Receipt For:	Occupation Doctor of Optometry	
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  225.00	
Full Name (Last, First, Middle Initial)  B. Dr Mitchell Todd Munson  Mailing Address 2040 ACH FIGH WAY		Date of Receipt
Mailing Address 9940 ASHLEIGH WAY	Chata 7' O. '	11 28 2013
City HIGHLANDS RANCH	State Zip Code CO 80126-4244	Transaction ID: 36663373  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	166.94
Name of Employer Self Employed	Occupation Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1836.34	
Full Name (Last, First, Middle Initial)  Dr Clarke Newman		Date of Receipt
Mailing Address 3311 Throckmorton St. Apt A4		11 28 2013
City Dallas	State Zip Code TX 75219-3663	Transaction ID : 36663374  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
Self Employed Receipt For:	Doctor of Optometry	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	2500.00	
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Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Curtis Ono Date of Receipt Mailing Address 822 W Barrett St 2013 11 28 City Zip Code State Transaction ID: 36663375 WA Seattle 98119-1829 Amount of Each Receipt this Period FEC ID number of contributing C 167.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1169.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr David Parker Date of Receipt Mailing Address 4889 Bobo PI 11 28 2013 City State Zip Code Transaction ID: 36663376 MS Olive Branch 38654-8223 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 416.70 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Gilbert Pierce Date of Receipt Mailing Address 8639 Olenbrook Dr 11 28 2013 City Zip Code State Transaction ID: 36663377 OH Lewis Center 43035-8702 Amount of Each Receipt this Period FEC ID number of contributing 45.00 С federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) 253.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Optometric Associa	tion Political Action Committee	
Full Name (Last, First, Middle Initial)  A. Dr Jennifer L Planitz		Date of Receipt
Mailing Address 3537 Newcastle Dr Se		1.1 28 2013
City Rio Rancho	State Zip Code NM 87124-3672	Transaction ID: 36663378
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 454.50
Name of Employer  Self Employed  Receipt For:  □ Primary □ General  Other (specify) ▼	Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  3636.00	
Full Name (Last, First, Middle Initial)  3. Dr William Thomas Reynolds Jr  Mailing Address 200 La Rose Ct		Date of Receipt
City Richmond	State Zip Code KY 40475-7855	Transaction ID : 36663379  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	164.51
Name of Employer Self Employed	Occupation  Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1671.07	
Full Name (Last, First, Middle Initial)  Dr Jennifer M. Smi Zolman		Date of Receipt
Mailing Address 141 Sea Cotton Cir		11 28 2013
City Charleston	State Zip Code SC 29412-8296	Transaction ID : 36663380  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.67
Name of Employer	Occupation	_
Self Employed Receipt For:	Doctor of Optometry	-
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 416.70	
SUBTOTAL of Receipts This Page (optional).		660.68
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NAME OF COMMITTEE (In Full) American Optometric Associa	tion Political Action Committee	
Full Name (Last, First, Middle Initial)  Or Jared Walker		Date of Receipt
Mailing Address 609 Diamond Dr		11 28 2013
City Kimberly	State Zip Code ID 83341-1938	Transaction ID : 36663381  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	30.00
Name of Employer  Self Employed  Receipt For:  □ Primary □ General  Other (specify) ▼	Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  300.00	-
Full Name (Last, First, Middle Initial)  Dr Todd Hamilton  Mailing Address 278 Falmouth Rd		Date of Receipt  11 28 2013
City Windham	State Zip Code ME 04062-4815	Transaction ID : 36663382  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	32.00
Name of Employer Self Employed	Occupation Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  224.00	
Full Name (Last, First, Middle Initial)  Dr Blaine A Littlefield		Date of Receipt
Mailing Address 27 Wilderness Dr		11 28 2013
City Freeport	State Zip Code ME 04032-5824	Transaction ID : 36663383  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	33.00
Name of Employer	Occupation	-
Self Employed  Receipt For:  Primary General  Other (specify) ▼	Doctor of Optometry  Aggregate Year-to-Date ▼  231.00	
SUBTOTAL of Receipts This Page (optional).	<b>&gt;</b>	95.00
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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Hilaire Pressley Date of Receipt Mailing Address 8635 W Sahara Ave 2013 11 28 City Zip Code State Transaction ID: 36663384 NV Las Vegas 89117-5858 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr David M Redman Date of Receipt Mailing Address 795 Foxhill Cir 11 28 2013 City State Zip Code Transaction ID: 36663385 Hollister CA 95023-9747 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 458.37 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Kevin Gee Date of Receipt Mailing Address 9119 Highway 6 Ste 200 11 28 2013 City Zip Code State Transaction ID: 36663386 TX Missouri City 77459-4876 Amount of Each Receipt this Period FEC ID number of contributing 181.88 С federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 1818.74 Other (specify) 273.55 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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80 Use separate schedule(s) for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Deborah Bernay Date of Receipt Mailing Address 1702 RUSTIC OAK LN 2013 11 28 City State Zip Code Transaction ID: 36663387 TX **SEABROOK** 77586-4556 Amount of Each Receipt this Period FEC ID number of contributing 120.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr James H Moser Jr Date of Receipt Mailing Address 8250 Quail Hollow Dr 11 28 2013 City State Zip Code Transaction ID: 36663388 TX Texarkana 75503-9652 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr William R Burges Date of Receipt Mailing Address 405 Paris St 11 28 2013 City Zip Code State Transaction ID: 36663389 TX Castroville 78009-4511 Amount of Each Receipt this Period FEC ID number of contributing 150.00 С federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 520.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Kristofer K Thornton Date of Receipt Mailing Address 2023 Cumberland Dr 2013 11 28 City State Zip Code Transaction ID: 36663390 TX Longview 75601-3412 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Ronald Danner Date of Receipt Mailing Address 1111 W Victory Way Ste 110 2013 11 28 City State Zip Code Transaction ID: 36663392 CO Craig 81625-2954 Amount of Each Receipt this Period FEC ID number of contributing 33.75 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Lillian T Kalaczinski Date of Receipt Mailing Address 7421 Treeline Dr Se 11 28 2013 City State Zip Code Transaction ID: 36663393 MI **Grand Rapids** 49546-7465 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) 108.75 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Sue Lowe Date of Receipt Mailing Address 1704 Skyline Rd 2013 11 28 City Zip Code State Transaction ID: 36663394 WY 82070-8932 Laramie Amount of Each Receipt this Period FEC ID number of contributing C 166.67 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1833.37 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Peter H Kehoe Date of Receipt Mailing Address 789 N Broad St 11 28 2013 City State Zip Code Transaction ID: 36663395 IL Galesburg 61401-2766 Amount of Each Receipt this Period FEC ID number of contributing 175.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1925.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Lynn Davis Date of Receipt Mailing Address 6546 JACAL CT NW 11 28 2013 State Zip Code Transaction ID: 36663396 NM **ALBUQUERQUE** 87114-6120 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 916.74 Other (specify) 425.01 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Diana Gilbert Date of Receipt Mailing Address 8629 N Pavillion 2013 11 28 City Zip Code State Transaction ID: 36663397 OH West Chester 45069-4885 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Andrea P Thau Date of Receipt Mailing Address 145 E 84Th St Apt 11A 11 28 2013 City State Zip Code Transaction ID: 36663398 NY New York 10028-2058 Amount of Each Receipt this Period FEC ID number of contributing 166.67 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1833.37 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Daniel Gauerke Date of Receipt Mailing Address 815 W Fulton St Ste 3 11 28 2013 City Zip Code State Transaction ID: 36663399 WI Waupaca 54981-1405 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) 206.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 62 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Paul W Bohac Date of Receipt Mailing Address 5775 Wyncliff Rd 2013 11 28 City Zip Code State Transaction ID: 36663400 SC N Charleston 29418-5220 Amount of Each Receipt this Period FEC ID number of contributing 33.34 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 366.74 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Donald Shute Date of Receipt Mailing Address 809 N 49th Ct 2013 11 28 City State Zip Code Transaction ID: 36663401 WA Yakima 98908-2517 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 590.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Carey Patrick Date of Receipt Mailing Address 970 Patrician Ct 11 28 2013 City Zip Code State Transaction ID: 36663403 TX Fairview 75069-8781 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) 163.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 63 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Mira Swiecicki Date of Receipt Mailing Address 664 Clark Rd 2013 11 28 City Zip Code State Transaction ID: 36663404 98225-7842 WA Bellingham Amount of Each Receipt this Period FEC ID number of contributing C 162.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1842.22 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Paul Zerbinopoulos Date of Receipt Mailing Address 22 Carrie Ln 11 28 2013 City State Zip Code Transaction ID: 36663405 RΙ N Kingstown 02852-4138 Amount of Each Receipt this Period FEC ID number of contributing 30.42 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 334.62 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Derek Louie Date of Receipt Mailing Address 5079 W Sunset Dr 11 28 2013 City State Zip Code Transaction ID: 36663406 OR Lake Oswego 97035-4253 Amount of Each Receipt this Period FEC ID number of contributing 42.00 С federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 462.00 Other (specify) 234.42 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 64 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Steven Leon Haleo Date of Receipt Mailing Address 458 Cranborne Chase 2013 11 28 City Zip Code State Transaction ID: 36663408 SC Fort Mill 29708-7922 Amount of Each Receipt this Period FEC ID number of contributing 30.42 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 334.62 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Denis Robert Holmes Date of Receipt Mailing Address 1313 Old Samish Rd 11 28 2013 City State Zip Code Transaction ID: 36663409 WA Bellingham 98229-8505 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Lanny Duclos JR Date of Receipt Mailing Address 3795 SUN VALLEY DR 11 28 2013 City Zip Code State Transaction ID: 36663410 UT **GRANTSVILLE** 84029-8512 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 100.42 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Craig C Hyre Date of Receipt Mailing Address Po Box 3075 2013 11 28 City Zip Code State Transaction ID: 36663411 WV Elkins 26241-6075 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Angela D Irvin Date of Receipt Mailing Address 686 Fines Cir 2013 11 28 City State Zip Code Transaction ID: 36663412 ΑL Sulligent 35586-4026 Amount of Each Receipt this Period FEC ID number of contributing 30.42 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 243.36 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Larry E Tope Date of Receipt Mailing Address Po Box 252 11 28 2013 City Zip Code State Transaction ID: 36663413 OH Paulding 45879-0252 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) 90.42 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 66 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Trevor Cleveland Date of Receipt Mailing Address 3726 Robbie St 2013 11 28 City Zip Code State Transaction ID: 36663414 OR Eugene 97404-1996 Amount of Each Receipt this Period FEC ID number of contributing C 167.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1135.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Richard Edlow Date of Receipt Mailing Address 8913 GRIFFIN WAY 2013 11 28 City State Zip Code Transaction ID: 36663417 **BALTIMORE** MD 21208-1424 Amount of Each Receipt this Period FEC ID number of contributing 82.64 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 917.40 Other (specify) Full Name (Last, First, Middle Initial) c. Dr David Frazee Date of Receipt Mailing Address 4962 Shoreline Dr 11 28 2013 City Zip Code State Transaction ID: 36663418 TX Frisco 75034-4058 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) 449.64 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 67 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Michael Leslie Weeden Date of Receipt Mailing Address 2701 Gaines Rd 2013 11 28 City Zip Code State Transaction ID: 36663420 MS Corinth 38834-5929 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Harvey B Richman FAAO Date of Receipt Mailing Address 136 Main St 2013 11 28 City State Zip Code Transaction ID: 36663422 NJ Manasquan 08736-3558 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 458.37 Other (specify) Full Name (Last, First, Middle Initial) c. Dr Alan Joseph Mathieu Date of Receipt Mailing Address PO BOX 132 11 28 2013 City Zip Code State Transaction ID: 36663424 MF **RAYMOND** 04071-0132 Amount of Each Receipt this Period FEC ID number of contributing 32.00 С federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 224.00 Other (specify) 273.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Use separate schedule(s) for each category of the Detailed Summary Page

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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Optometric Associati	on Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr Vincent Brandys JR  Mailing Address 1728 Wildberry Dr Unit F		Date of Receipt
City	State Zin Code	11 28 2013
City Glenview	State Zip Code IL 60025-1748	Transaction ID : 36663425
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  35.00
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  245.00	
Full Name (Last, First, Middle Initial)  3. Dr Michelle A Broderick		Date of Receipt
Mailing Address 7 Broad Sound Ln		11 28 2013
City	State Zip Code	Transaction ID : 36663426
Freeport	ME 04032-6297	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	32.00
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  256.00	
Full Name (Last, First, Middle Initial)  C. Dr Michael Bennett		Date of Receipt
Mailing Address 4940 Victoria PI		11 29 2013
City	State Zip Code	Transaction ID : 36663440
Guthrie	OK 73044-8668	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	166.67
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1666.70	
SUBTOTAL of Receipts This Page (optional)		233.67
TOTAL This Period (last page this line number	only)	

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## ITEMIZED RECEIPTS

SCHEDULE A (FEC Form 3X) FOR LINE NUMBER: PAGE 69 OF 80 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Jack Sol Mermelstein Date of Receipt Mailing Address 38-63 DAURIA DR 30 2013 11 City State Zip Code Transaction ID: 36663446 FAIR LAWN NJ 07410-5104 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ General

Other (specify) ▼	550.00	
Full Name (Last, First, Middle Initial) Dr Robert Sholomon Mailing Address 269 Walton St		Date of Receipt  11 30 2013
City	State Zip Code	Transaction ID: 36663447
Englewood	NJ 07631-5016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last First Middle Initial)		

Full Name (Last, First, Middle Initial) Dr James English Date of Receipt Mailing Address 5465 BALDWIN RD 2013 11 22 City State Zip Code Transaction ID: 36664126 MI SWARTZ CREEK 48473-9153 Amount of Each Receipt this Period FEC ID number of contributing 240.00 С federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)			7	Ī	7	I	29	0.00	)	
TOTAL This Period (last page this line number only)	_	_	7		7	_	Ξ	_	_	

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for each category of the Detailed Summary Page	X	11a		11b		11c		12	
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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Optometric Associat	ion Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr David W Wineland  Mailing Address 9400 Careard Rd.		Date of Receipt
Mailing Address 8400 Concord Rd		11 25 2013
City	State Zip Code	Transaction ID : 36664138
Johnstown	OH 43031-8154	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	127.25
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1399.75	
Full Name (Last, First, Middle Initial)  3. Dr Jeffrey R Urness		Date of Receipt
Mailing Address 6400 W 20Th Ave		1,1 29 2013
City	State Zip Code	Transaction ID : 36664160
Kennewick	WA 99338-1510	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  365.00	
Full Name (Last, First, Middle Initial)  C. Dr Jenny O Cheung		Date of Receipt
Mailing Address 2087 32Nd Ave		11 29 2013
City San Francisco	State Zip Code CA 94116-1124	Transaction ID : 36664161
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  240.00
Name of Employer	Occupation	
Self Employed	Doctor of Optometry	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	240.00	
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	732.25
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 71 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr Eric Orava Date of Receipt Mailing Address 641 41St St 2013 11 29 City Zip Code State Transaction ID: 36664166 NY Brooklyn 11232-3138 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr Dorothy Hitchmoth Date of Receipt Mailing Address PO Box 302 11 29 2013 City State Zip Code Transaction ID: 36664167 NH New London 03257-0302 Amount of Each Receipt this Period FEC ID number of contributing 88.00 federal political committee. Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 880.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 188.00 SUBTOTAL of Receipts This Page (optional)..... 28945.01 TOTAL This Period (last page this line number only).....

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 OF 80 (check only one)  11a 11b 11c 12 13 14 15 16 X 17
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American Optometric Association	n Politica	al Action Committee	
Α.	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address PO Box 790251			Date of Receipt
	City St. Louis	State MO	Zip Code 63179	Transaction ID : 36668773  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		22.35
	Name of Employer	Occupation	1	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 241.32	Bank Interest
В.	Full Name (Last, First, Middle Initial)			Date of Receipt
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	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer	Occupation		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼	
<u> </u>	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address			M = M / D = D / Y = Y = Y
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		This are a second the
	Name of Employer	Occupation		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼	
	UBTOTAL of Receipts This Page (optional)			22.35

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			Summary Page		×	21b 27	22	$\vdash$	23 28b	<u> </u>	24 28c	25 29		26			
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$\setminus$	NAME OF COMMITTEE (In Full)																
	American Optometric Association F	Political	Action Com	mitte	е												
_	Full Name (Last, First, Middle Initial)																
Α.	WellsFargo						Date of Disbursement										
	Mailing Address 1650 Tyson Blvd.				11 12 2013												
	City	State	Zip Code				Tran		ian ID	. 26	CCAAEE						
	McLean	VA	22102				rran	Sact	טו ווסו	. 30	664455						
	Purpose of Disbursement Bank Fees			00	)1		Amoui	nt of	Each	Disl	burseme	ent this	Perio	od			
	Candidate Name			Cate		//						100	3.37	П			
	Office Sought: House Disbursen	nent For:		Тур	ре			_	7	_	-7			_			
	Senate	Primary	General				Bank F	ees									
	State: District:	Other (spe	CITY) $\blacktriangledown$														
_	Full Name (Last, First, Middle Initial)																
В.	Bank of America						Date	of Di	sburse	mer							
	Mailing Address PO Box 790251						11	/		)5		2013	Y				
	City	State	Zip Code														
	•	MO	63179				Transaction ID : 36668765										
	Purpose of Disbursement American Express Fees			00	)1		Amoui	ent this	Perio	od							
	Candidate Name			Cate		//	276.03										
	Office Sought: House Disbursen	nent For		Тур	ре												
	Senate	Primary	General			American Express Fees											
	President State: District:	Other (spec	сіту) 🔻														
_	Full Name (Last, First, Middle Initial)						Data	( D:									
U.	Bank of America						Date of										
	Mailing Address PO Box 790251						11	/	1	5		2013	Y				
		State	Zip Code				Tran	sact	ion ID	: 36	6668767						
	St. Louis Purpose of Disbursement	MO	63179														
	Visa/Master Card Fees			00	)1	ш	Amoui	nt of	Each	Disl	burseme	ent this	Perio	od			
	Candidate Name			Cate		//	_					6	6.61				
	Office Sought: House Disbursen	nent For:		- 71	-				7	_	7			_			
		Primary	General				Visa/M	aste	r Card	Fee	:S						
		Other (spe	cify) 🔻														
	State: District:																
5	SUBTOTAL of Disbursements This Page (optional)					<u> </u>			,	_	7	135′	1.01				
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	EMIZED DISBURSEMENTS	Use separate schedule(s)			k on														
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	ny information copied from such Reports and Staten for commercial purposes, other than using the nam																		
01	NAME OF COMMITTEE (In Full)	le and address of any point	ai con	111111	пее	10 :	SOIICIL	OHUH	bution	15	11011	Sucii	JOHIIII	nee.					
$ \rangle$	American Optometric Association F	Political Action Com	mitte	Δ															
	American Optometric Association i	Ollical Action Com	iiiiiiii	-															
_	Full Name (Last, First, Middle Initial)																		
Α.	Bank of America						Date	of D	isburs	en	nen	t							
	Mailing Address PO Box 790251					$\dashv$	M 11		_	04			y   y 2013	I Y	1				
	Walling Address FO Box 790251									04			2013	-					
	City	State Zip Code					Trai	2020	tion II	n .	261	668770							
	C.: 200.0	MO 63179					Irai	isac	tion ii	: ט	300	000770							
	Purpose of Disbursement Bank Fees			001			Amou	ınt o	f Each	ıГ	Nich	urseme	nt thic	Por	riod				
	Candidate Name				Ļ		AIIIOC	1111 0	Laci		טפוכ	urserrie	11 1113	1 61	lou				
			Cate T	ego ype			L.		- 7				88	39.82	2				
	Office Sought: House Disbursen	nent For:				1						,							
		Primary General					Bank	Fees	;										
	President State: District:	Other (specify) ▼																	
_	Full Name (Last, First, Middle Initial)					+							—						
В.	Tuli Name (Last, Flist, Middle Illitial)						Date	of D	isburs	en	nen	t							
							M M / D D / Y Y Y Y												
	Mailing Address						L.				J	Ь.							
	City	Nata 7ia Cada	7:- Cada																
	City	State Zip Code																	
	Purpose of Disbursement		_			1													
			Amount of Each Disbursement this Period																
	Candidate Name		Category/ Type										.						
	Office Sought: House Disbursen	nent For:	- 1	ype		-			- 5	Ť		,							
		Primary General																	
	President	Other (specify) ▼																	
_	State: District:					$\perp$													
C.	Full Name (Last, First, Middle Initial)						Doto	of D	isburs		~ ~ ~								
C.											_								
	Mailing Address					┪	M	M	/ D	- 1	D	/   Y =	Y	= Y					
	City	State Zip Code																	
	Purpose of Disbursement					+													
	·						Amou	int o	f Each	ո [	Disb	urseme	nt this	Per	iod				
	Candidate Name		Category/									—	-	-					
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angle American Optometric Association F	Political Action Com	mittee						
Full Name (Last, First, Middle Initial)			D					
Cory Booker For Senate			Date of Disbursement	Y				
Mailing Address PO Box 32237			11 05 2013					
,	State Zip Code		Transaction ID: 36588175					
Newark	NJ 07102							
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Candidate Name		Category/	500	00.00				
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· LOBO PAC	LOBO PAC							
Mailing Address P.O. Box 492		11 05 2013						
,	State Zip Code NM 87103		Transaction ID: 36588257					
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Mark Pryor For Us Senate			Date of Disbursement					
Mailing Address PO Box 2720			11 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Y				
City	State Zip Code							
Little Rock	AR 72203		Transaction ID: 36588288					
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Sen. Mark L. Pryor		Type	400	00.00				
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or	for commercial purposes, other than using the name	ne and address of any po	olitical committee to	o solicit contributions from such committee.
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_	Full Name (Last, First, Middle Initial)			
Α.	Citizens To Elect Rick Larsen			Date of Disbursement
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	Mailing Address PO Box 326			11 05 2013
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		WA 98206		
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	Rep. Rick Larsen		Туре	2000.00
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	President	Other (specify) ▼		
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В.	Luke Messer For Congress			Date of Disbursement
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	Mailing Address P.O. Box 917			11 05 2013
	City	State Zip Code		Transaction ID: 36588290
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C.	Mailing Address 2 1/2 Beacon Street	State Zip Code		11 07 2013
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C.	Mailing Address 2 1/2 Beacon Street  City Street  Concord  Purpose of Disbursement Candidate Contribution  Candidate Name  Jeanne Shaheen	·	Category/	Transaction ID : 36603960  Amount of Each Disbursement this Period
C.	Mailing Address 2 1/2 Beacon Street  City Street  Concord  Purpose of Disbursement Candidate Contribution  Candidate Name  Jeanne Shaheen  Office Sought: House Disbursement	NH 03301	Category/ Type	Transaction ID: 36603960  Amount of Each Disbursement this Period  1000.00
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В.	Buckeye Liberty PAC						D	ate of	t Dis	burse	ment				
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	Mailing Address 701 8th Street NW Suite 500						ŀ	11		1	1	ш	2013	-	
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٥.	Tom Rice For Congress														
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	Suite 310-A									-			2010		
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	Myrtle Beach	SC	29577					Trans	sacti	on ID	: 366	08590	1		
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_	Full Name (Last, First, Middle Initial)					, D		_		
A.	Friends Of Joe Heck					of Disburser				
	Mailing Address PO Box 750114				11	11		2013	Y	
	City	State	Zip Code		Tron	acation ID	26600502			
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Ь.	Renee Ellmers For Congress Committee					_		V		
	Mailing Address PO Box 99567	ess PO Box 99567				11 / 11 / 2013				
	Raleigh	State NC	Zip Code 27624		Tran	saction ID	36608593			
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C.	New Pioneers PAC				Date o	of Disburser		Y	Υ	
	Mailing Address 228 S Washington St Suite 115				11	11		2013		
	,	State VA	Zip Code 22314		Tran	saction ID	36608594			
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r for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  American Optometric Association Political Action Committee  Full Name (Last, First, Middle Initial)  LOBO PAC  Mailing Address P.O. Box 492  City State Zip Code NM 87403  Purpose of Disbursement Committee Contribution  Cardidate Name  LOBO PAC  Office Sought: House Disbursement For: Gardeapony Transaction ID: 36644254  Amount of Each Disbursement this Period Category Type  City State: Zip Code Gardeapony Type  Category Type  City State: Zip Code Gardeapony Type  Committee Contribution  Committee Contribution  Committee Contribution  Committee Contribution  Committee Contribution  Committee Contribution  Transaction ID: 36644256  Amount of Each Disbursement  Candidate Special Special State: Zip Code Gardeapony Type  Committee Contribution  Cardidate Name  Douglas Collins  Full Name (Last, First, Middle Initial)  Collins For Congress  Mailing Address PO Box 1295  Full Name (Last, First, Middle Initial)  Cardidate Special		Detailed Sulfillially Fage	27	28a 28b 28c 29 30					
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